

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MM	10591	11/2
O.I.P.E. CLASSIFIER		48	11/2/00
FORMALITY REVIEW	TH	953	12-05-00
RESPONSE FORMALITY REVIEW	lit	907	4-6-01

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final Original	
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	0
8	0
9	0
10	0
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	0
18	0
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21	✓
22	✓
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25	✓
26	✓
27	✓
28	0
29	0
30	0
31	0
32	✓
33	✓
34	0
35	0
36	✓
37	✓
38	✓
39	0
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Claim	Date
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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